

Direct Loans

William D. Ford Federal Direct Loan Program

William D. Ford Federal Direct Loan Program Income Contingent Repayment Plan Consent to Disclosure of Tax Information

OMB No. 1845-0017
Form Approved
Exp. Date 12/31/2002

I (We) authorize the Internal Revenue Service (IRS) to disclose certain tax return information (for the tax years listed below) which includes my (our) name(s), address(es), Social Security Number(s), filing status, tax year, and Adjusted Gross Income(s). This information will be disclosed to the U.S. Department of Education (ED) and the William D. Ford Federal Direct Loan (Direct Loan) program contractors and subcontractors for the sole purpose of determining the appropriate income contingent repayment amount on the Direct Loan Program loan(s) that is subject to income contingent repayment. ED's Direct Loan Program contractors and subcontractors may change. You may obtain the names of the current Direct Loan Program contractors and subcontractors by writing to ED at the address shown at the bottom of this page.

Request for Tax Years: 2000, 2001, 2002, 2003, and 2004.

See the back of this form for instructions.

(1) Borrower's (Taxpayer's) Name Printed ***as it appears on tax returns***

(2) Borrower's (Taxpayer's) Social Security Number

(3) Borrower's (Taxpayer's) Signature
Signature is valid for 60 days – see instructions on the back of the form.

____-____-____ (MM-DD-YYYY)
Date

PLEASE NOTE: If you are married, your spouse is required to complete the following:

(4) Spouse's (Taxpayer's) Name Printed ***as it appears on tax returns***

(5) Spouse's (Taxpayer's) Social Security Number

(6) Spouse's (Taxpayer's) Signature
Signature is valid for 60 days – see instructions on the back of the form.

____-____-____ (MM-DD-YYYY)
Date

Return this form to: U.S. Department of Education
Consolidation Department
Loan Origination Center
P.O. Box 242800
Louisville, KY 40224-2800

William D. Ford Federal Direct Loan Program Income Contingent Repayment Plan – Consent to Disclosure of Tax Information

Borrower Instructions: To be considered for the Income Contingent Repayment Plan, you and/or your spouse must complete the Consent to Disclosure of Tax Information on the front of this form. Please complete the form using the following instructions:

- Item 1.** Print (or type) your name as it appears on your tax returns.
- Item 2.** Print (or type) your Social Security Number.
- Item 3.** Sign and date the form in blue or black ink only. Report the date as month-day-year (MM-DD-YYYY).

Items 4-6 must be completed if you are married.

- Item 4.** If you are married, print (or type) your spouse's name as it appears on tax returns.
- Item 5.** If you completed Item 4, print (or type) your spouse's Social Security Number.
- Item 6.** If you completed Items 4 and 5, have your spouse sign and date the form in blue or black ink only. Report the date as month-day-year (MM-DD-YYYY).

Send this form to the U.S. Department of Education (ED) at the address shown on the front. **DO NOT SEND THIS FORM TO THE INTERNAL REVENUE SERVICE (IRS).** Once your application to participate in the Income Contingent Repayment Plan has been approved, ED will forward this form to the IRS. ***Because the IRS will not accept this form if more than 60 days have passed since you and/or your spouse signed the form, it is important that you return the completed form to ED promptly.***

Request to Revoke Tax Information Authorization: You and/or your spouse may revoke the Consent to Disclosure of Tax Information at any time. To revoke consent, send a copy of the original authorization with the word **"REVOKE"** across the top directly to the IRS at the address given below. (If the revocation is sent to ED, there will be a delay before the revocation becomes effective.) The revocation must be signed by the taxpayer(s) who signed the original Consent to Disclosure of Tax Information. If you and/or your spouse do not have a copy of the original form, a statement of revocation is acceptable. The statement must indicate that the authority to disclose tax information to the Direct Loan Program is revoked, and must be signed by the taxpayer(s) who signed the original authorization form.

NOTE: If you and/or your spouse revoke(s) the Consent to Disclosure of Tax Information, you and/or your spouse become(s) ineligible for income contingent repayment, and you and/or your spouse must contact the Direct Loan Servicing Center to select another repayment option. If you and/or your spouse fail(s) to contact the Direct Loan Servicing Center, ED will assign you and/or your spouse to the Standard Repayment Plan.

Revocation Address: IRS
P.O. Box 400
Stop 125
Holtsville, NY 11742

Privacy Act Disclosure Notice : The Privacy Act of 1974 (5 U.S.C.552a) requires that the following notice be provided to you. The authority for collecting the information requested on this form is 451 et seq. of the Higher Education Act of 1965, as amended. Your disclosure of this information is voluntary. However, if you do not provide this information, you cannot be considered for the Income Contingent Repayment Plan. The information on this form will be used to determine your eligibility for repayment of your Direct Loan Program loan(s) under the Income Contingent Repayment Plan. The information in your file may be disclosed to third parties as authorized under routine uses in the Privacy Act notices called "Title IV Program Files" (originally published on April 12, 1994, Federal Register, Vol. 59, p. 17351) and "National Student Loan Data System" (originally published on December 20, 1994, Federal Register, Vol. 59, p. 65532). Thus, this information may be disclosed to federal and state agencies, private parties such as relatives, present and former employers and creditors, and contractors of the Department of Education for purposes of administration of the student financial assistance program, for enforcement purposes, for litigation where such disclosure is compatible with the purposes for which the records were collected, for use by federal, state, local, or foreign agencies in connection with employment matters or the issuance of a license, grant, or other benefit, for use in any employee grievance or discipline proceeding in which the Federal Government is a party, for use in connection with audits or other investigations, for research purposes, for purposes of determining whether particular records are required to be disclosed under the Freedom of Information Act, and to a Member of Congress in response to an inquiry from the congressional office made at your written request.

Because we request your social security number (SSN), we must inform you that we collect your SSN on a voluntary basis, but section 484(a)(4) of the HEA (20 U.S.C. 1091(a)(4)) provides that, in order to received any grant, loan, or work assistance under Title IV of the HEA, a student must provide his or her SSN. Your SSN is used to verify your identity, and as an account number (identifier) throughout the life of your loan(s) so that data may be recorded accurately.

Paperwork Reduction Notice: According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a currently valid OMB control number. The valid OMB control number for this information collection is 1845-0017. The time required to complete this information collection is estimated to average 0.2 hours (12 minutes) per response, including the time to review instructions, search existing data resources, gather and maintain the data needed, and complete and review the information collection. **If you have any comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to:** U.S. Department of Education, Washington, DC 20202-4651. **If you have any comments or concerns regarding the status of your individual submission of this form, write directly to:**

U.S. Department of Education
Consolidation Department
Loan Origination Center
P.O. Box 242800
Louisville, KY 40224-2800